



Community Outreach Grant Application

Additional space is provided on page 3 if answers exceed character limits

Date of application: _____

Foundation focus area (check one):

Elder Care Wellness Support Youth Development Other: _____

Applying for (check one): Outreach (up to \$2,500) COVID-19 (up to \$5,000) Support (up to \$10,000)

WNC area served (list all applicable counties): _____

Are you a 501(c)3?: Yes No Tax ID# _____ Other org. fiscal agent?: Yes No

Organization name: _____ Organization annual budget: _____

Address (admin office): _____

City/State/Zip: _____ Website: _____

Contact person/title: _____

Phone number: _____ Email address: _____

List any previous WNC Bridge Foundation support in the last 2 years:

Limit 490 characters

Project name: _____

Dates of the project: _____ Amount requested: \$ _____

Projected attendance—Outreach: _____

Projected participants—COVID-19 or Support: _____

Purpose of grant: *(Please provide specific information.)*

Limit 740 characters

Projected outcome of request: (What will you do, how will you do it, will anyone be better off?)

Limit 740 characters

Marketing opportunities for WNC Bridge Foundation:

Limit 740 characters

Marketing materials needed from WNC Bridge Foundation: (include specs and deadlines) *

Limit 740 characters

** Samples of marketing materials should be emailed or mailed to the foundation.*

Signature, Executive Director

Date

INSTRUCTIONS

- Email completed application to grants@WNCbridge.org
- Along with this application, feel free to attach any supporting documentation regarding your request.
- Applications are reviewed monthly if the application is received by the 15th of the month. Committee decision will be emailed to you by the end of the month. If grant is approved, a report is required for you to complete. This report will be requested by the foundation through an email.
- If request is for equipment, facility improvement, and/or professional development, please include estimate or invoice.

INTERNAL USE

Approved Not approved _____

Amount: _____

Payment date: _____

Date approved: _____

Comments: _____

Use this page if you need additional space to answer any of the questions

A large, empty rectangular area with a light blue border, intended for providing additional space to answer questions. The area is completely blank and occupies most of the page.